DUNN COUNTY HEALTH CARE CENTER

3001 US HWY 12 EAST

MENOMONIE	54751	Phone: (715) 232-2661	-	Ownership:	County
Operated from	1/1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Conj	junction with	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and St	affed (12/31/02):	142	Title 18 (Medicare) Certified?	Yes
Total Licensed	Bed Capacity	(12/31/02):	155	Title 19 (Medicaid) Certified?	Yes
Number of Resid	dents on $12/31$	/02:	129	Average Daily Census:	133

Services Provided to Non-Residents	Age, Sex, and Primary Diagn						
Home Health Care		 Primary Diagnosis	%	Age Groups	90	Less Than 1 Year	33.3
Supp. Home Care-Personal Care	No	•		'			40.3
Supp. Home Care-Household Services	No					More Than 4 Years	26.4
Day Services	No	Mental Illness (Org./Psy)	33.3	65 - 74	7.8		
Respite Care	No	Mental Illness (Other)	8.5	75 - 84	41.9		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.8	85 - 94	40.3	* * * * * * * * * * * * * * * * * * *	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.8	95 & Over	7.8	Full-Time Equivalent	
Congregate Meals	No	Cancer	2.3			Nursing Staff per 100 Res	idents
Home Delivered Meals	No	Fractures	1.6		100.0	(12/31/02)	
Other Meals	No	Cardiovascular	16.3	65 & Over	97.7		
Transportation	No	Cerebrovascular	10.9			RNs	15.8
Referral Service	No	Diabetes	7.0	Sex	%	LPNs	5.8
Other Services	Yes	Respiratory	8.5			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	9.3	Male	28.7	Aides, & Orderlies	51.5
Mentally Ill	No			Female	71.3	1	
Provide Day Programming for			100.0	1		1	
Developmentally Disabled	Yes				100.0		
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Method of Reimbursement

		edicare			edicaid			Other			Private Pay	<u> </u>		amily Care			anaged Care			
Level of Care	No.	96	Per Diem (\$)	No.	%	Per Diem (\$)	No.	0/0	Per Diem (\$)	No.	90	Per Diem (\$)	No.	0/0	Per Diem (\$)	No.	90	Per Diem (\$)	Total Resi- dents	
Int. Skilled Care	1	7.7	140	1	1.3	121	0	0.0	0	1	2.6	140	0	0.0	0	0	0.0	0	3	2.3
Skilled Care	12	92.3	140	73	93.6	103	0	0.0	0	36	94.7	119	0	0.0	0	0	0.0	0	121	93.8
Intermediate				4	5.1	85	0	0.0	0	1	2.6	119	0	0.0	0	0	0.0	0	5	3.9
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	13	100.0		78	100.0		0	0.0		38	100.0		0	0.0		0	0.0		129	100.0

DUNN COUNTY HEALTH CARE CENTER

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12	/31/02
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	90	As	sistance of	% Totally	Number of
Private Home/No Home Health	11.3	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	1.4	Bathing	0.0		58.9	41.1	129
Other Nursing Homes	3.5	Dressing	5.4		74.4	20.2	129
Acute Care Hospitals	79.6	Transferring	22.5		56.6	20.9	129
Psych. HospMR/DD Facilities	0.0	Toilet Use	16.3		52.7	31.0	129
Rehabilitation Hospitals	0.7		40.3		50.4	9.3	129
Other Locations	3.5	* * * * * * * * * * * * * * * * * * *	******	*****	*****	******	******
otal Number of Admissions	142	Continence		용	Special Treatmen	ts	90
ercent Discharges To:		Indwelling Or Exter:	nal Catheter	14.0	Receiving Resp	iratory Care	15.5
Private Home/No Home Health	22.0	Occ/Freq. Incontine:	nt of Bladder	42.6	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	26.2	Occ/Freq. Incontine	nt of Bowel	24.0	Receiving Suct	ioning	0.0
Other Nursing Homes	2.8	1			Receiving Osto	my Care	3.9
Acute Care Hospitals	5.0	Mobility			Receiving Tube	Feeding	0.8
Psych. HospMR/DD Facilities	0.0	Physically Restrain	ed	4.7	Receiving Mech	anically Altered Diet	s 27.9
Rehabilitation Hospitals	2.1	i			,	-	
Other Locations	4.3	Skin Care			Other Resident C	haracteristics	
Deaths	37.6	With Pressure Sores		12.4	Have Advance D	irectives	75.2
otal Number of Discharges		With Rashes		9.3	Medications		
(Including Deaths)	141	1			Receiving Psyc	hoactive Drugs	61.2

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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	Ownership:		ership:	Bed	Size:	Lic	ensure:		
	This	Government Peer Group		100	-199	Ski	lled	Al	1
	Facility			Peer	Group	Peer	Group	Facilities	
	%	olo	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	85.3	86.3	0.99	82.4	1.04	83.3	1.02	85.1	1.00
Current Residents from In-County	85.3	75.8	1.12	79.0	1.08	75.8	1.12	76.6	1.11
Admissions from In-County, Still Residing	27.5	27.1	1.02	21.3	1.29	22.0	1.25	20.3	1.35
Admissions/Average Daily Census	106.8	96.4	1.11	130.4	0.82	118.1	0.90	133.4	0.80
Discharges/Average Daily Census	106.0	98.7	1.07	132.8	0.80	120.6	0.88	135.3	0.78
Discharges To Private Residence/Average Daily Census	51.1	41.6	1.23	58.2	0.88	49.9	1.02	56.6	0.90
Residents Receiving Skilled Care	96.1	91.9	1.05	93.4	1.03	93.5	1.03	86.3	1.11
Residents Aged 65 and Older	97.7	87.8	1.11	94.2	1.04	93.8	1.04	87.7	1.11
Title 19 (Medicaid) Funded Residents	60.5	67.7	0.89	73.9	0.82	70.5	0.86	67.5	0.90
Private Pay Funded Residents	29.5	19.7	1.49	17.0	1.73	19.3	1.53	21.0	1.40
Developmentally Disabled Residents	0.8	0.6	1.27	0.8	1.03	0.7	1.07	7.1	0.11
Mentally Ill Residents	41.9	47.5	0.88	34.5	1.21	37.7	1.11	33.3	1.26
General Medical Service Residents	9.3	15.9	0.58	19.0	0.49	18.1	0.51	20.5	0.45
Impaired ADL (Mean)	54.0	47.8	1.13	48.0	1.12	47.5	1.14	49.3	1.09
Psychological Problems	61.2	56.9	1.08	51.4	1.19	52.9	1.16	54.0	1.13
Nursing Care Required (Mean)	8.7	5.9	1.48	6.8	1.28	6.8	1.29	7.2	1.21